

Docket No. 7156/52427-AB/JPW/GJG/BJA

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): DON FISHBEIN

Serial No. : 10/799,197 Examiner: A. HUGHES

Filed : MARCH 12, 2004 Group Art Unit: 1614

For : USE OF OXANDROLONE IN THE TREATMENT OF BURNS AND OTHER WOUNDS

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: JUNE 25, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

\_\_\_\_\_ Small entity status of this application under 37 C.F.R. \$1.9 and \$1.27 has been previously established.

\_\_\_\_\_ A verified statement to establish small entity status under 37 C.F.R. \$1.9 and \$1.27 is enclosed.

\_\_\_\_\_ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	18 -	* 20 =	*** 0 X	\$25	\$50	= 0	
Independent Claims	1 -	** 3 =	*** 0 X	\$100	\$200	= 0	
Multiple Dependent Claim(s) Presented For First Time Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				\$180	\$360	= 0	
				TOTAL ADDITIONAL FEE		\$ 0	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter  
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The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter  
☒ Return Receipt Postcard  
☒ An Information Disclosure Statement, including Form PTO-1449 **SUBSTITUTE**  
(Copies of citations included: Yes ☒ No \_\_\_\_\_  
and a fee of \$ 180.00 included)

\_\_\_\_\_ A Petition for an Extension of Time, including a fee of  
\$ \_\_\_\_\_ for a Petition for \_\_\_\_\_ Month(s) Extension of Time

\_\_\_\_\_ Other (identify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE TOTAL FEE DUE IS \$ 180.00.

☒ A check in the amount of \$ 180.00 is enclosed.

\_\_\_\_\_ Please charge Deposit Account No. \_\_\_\_\_ in the amount of  
\$ \_\_\_\_\_.

☒ The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

☒ Fees under 37 C.F.R. \$1.16 for the presentation of extra claims  
\_\_\_\_\_ Patent application processing fees under 37 C.F.R. \$1.17

Respectfully submitted,

I hereby certify that this  
correspondence is being deposited this  
date with the U.S. Postal Service with  
sufficient postage as first class mail  
in an envelope addressed to:  
Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.  
Gary J. Gershik 6/25/02  
Gary J. Gershik Date  
Reg. No. 39,992

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